

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

RECEIVED

2013 OCT 17 AM 10:26  
Office Use Only1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12 FEB 15 MAIL CENTER

Citizens for Mike Assad, Inc.

ADDRESS (number and street)

106 Minnetonka Ave

Check if different  
than previously  
reported. (ACC)

Absecon

NJ

08201

FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00546416

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

NJ

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y Y

in the  
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y

through

M M /

D D /

Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dorothy L. Assad

Signature of Treasurer

Dorothy L. Assad

Date

10 /

08 /

2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)